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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 |
| | Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Jasmine | |
| Write the name that is on your government-issued | First name | First name |
| picture identification (for | Middle name | Middle name |
| example, your driver's license or passport | Mack | |
| notite of paceport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last 8 years | First name | First name |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX5997 | XXX - XX- |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number | 9 xx - xx- | 9 xx - xx- |
| (ITIN) | | |

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| Debtor 1 Jasmine First Name | Mack Middle Name Last Name | Case number (if known) |
|--|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years Include trade names and | Business name | Business name |
| doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 1857 N Maud Ave | If Debtor 2 lives at a different address: |
| | Number Street | Number Street |
| | Chicago Illinois 60614 City State Zip Code | City State Zip Code |
| | Cook County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | - | |
| | | |

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| De | ebtor 1 Jasmine | | | Case number (if kno | wn) |
|-----|---|---|---|--|--|
| | First Name | Middle Name La | st Name | | |
| Pa | rt 2: Tell the Court Abo | ut Your Bankruptcy Case | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description Bankruptcy (Form B2010)). Also, go Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | |
| 8. | How you will pay the fee | more details about how your cashier's check, or money ord may pay with a credit card or I need to pay the fee in insta Individuals to Pay Your Filing I request that my fee be wait judge may, but is not required the official poverty line that a | may pay. Typically, if you check with a pre-printe allments. If you choose a Fee in Installments (O ived (You may request d to, waive your fee, an pplies to your family simust fill out the Application. | ou are paying the submitting your ed address. this option, sig fficial Form 103, this option only d may do so only ze and you are u | the clerk's office in your local court for a fee yourself, you may pay with cash, repayment on your behalf, your attorney on and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of inable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. | Have you filed for bankruptcy within the last 8 years? | ✓ No. Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. | Do you rent your residence? | No. Go to line 12. | tement About an Eviction | | you want to stay in your residence? t You (Form 101A) and file it with |

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Mack Debtor 1 Jasmine __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Jasmine Mack Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Mack Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Jasmine Mack Signature of Debtor 1 Signature of Debtor 2 Executed on _ 5/9/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Jasmine | | Mack | Case number (ii | f known) |
|--|----------------------------|-------------------------|--------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | er Chapter 7, 11, 12, | or 13 of title 11, Unite | nave informed the debtor(s) about ed States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | red by 11 U.S.C. § 34 | 12(b) and, in a case in | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the inf | formation in the sched | dules filed with the petition is incorrect. |
| attorney, you do not | • | , , | | · |
| need to file this page. | /s/ Chad Mizelle | | Date | 5/9/2017 |
| | Signature of Attorney for | or Debtor | | MM / DD / YYYY |
| | g | | | |
| | | | | |
| | Chad Mizelle | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 20 S. Clark Street | | | |
| | Street | | | |
| | 28th Floor | | | |
| | | | | |
| | Chicago | | Illinois | 60603 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | | Email address | cmizelle@semradlaw.com |
| | | | | |
| | | | Illinois | S |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Jasmine | Mack | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| Case number (If known) | | | (State) | | | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filii | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$4,227.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$4,227.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$26,792.83 |
| Your total liabilities | \$26,792.83 |
| Part 3: Summarize Your Income and Expenses | |
| . Schedule I: Your Income (Official Form 106I) | \$773.50 |
| Copy your combined monthly income from line 12 of Schedule I | |
| | |

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Mack Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,634.07 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$15,514.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$15,514.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | inforn | nation to identify your ca | ase: | | | | | | |
|--|---------------------------------|---|--|-----------------------|---|------------------------------------|---------------------|---|--|
| Debtor 1 | | Jasmine | | | Mack | | | | |
| Debtor 1 | | First Name | Middle N | lame | Last Name | | | | |
| Debtor 2 (Spouse, if fil | ing) | First Name | Middle N | lame | Last Name | | | | |
| United Sta | ites Ba | ankruptcy Court for the: | Northern | | District of Illinois | | | | |
| Case num | ber | | | | (State) | | | | |
| ` ′ | ıl Fa | orm 106A/B | | | | | | | Check if this is an amended filing |
| | | e A/B: Prope | rtv | | | | | | 12/1 |
| In each ca category v responsibl write your | tegor vhere e for name | y, separately list and d you think it fits best. E supplying correct infor a and case number (if k | lescribe items. Li Be as complete a mation. If more s nown). Answer e | nd ad pace very | asset only once. If an a curate as possible. If tw is needed, attach a sepquestion. | vo married peop parate sheet to | ple are this foi | filing together, both a rm. On the top of any a | re equally |
| | | | • | | | | | | |
| 1. Do you | No. G | or have any legal or eq Go to Part 2 Where is the property? | juitable interest | | y residence, building, la | | roperty | | |
| 1.1 | Stree | t address, if available, or o | other description | Wh | at is the property? Chec Single-family home Duplex or multi-unit build | | | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. |
| | | | | | Condominium or coopera Manufactured or mobile h Land | | | entire property? | Current value of the portion you own? |
| | Num | per Street State | Zip Code | | Investment property Timeshare Other | | | Describe the nature o interest (such as fee s the entireties, or a life | simple, tenancy by |
| | Oity | cialo | zip code | Wh one | o has an interest in the | property? Check | k | Check if this is co (see instructions) | mmunity property |
| | | | | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or | nly | | | |
| | | | | | At least one of the debtor er information you wish perty identification num | to add about tl | his iter | n, such as local | |
| | own c | or have more than one, lis | st here: | Wh | at is the property? Chec | k all that apply. | | | claims or exemptions. Put |
| 1.2 | Stree | t address, if available, or o | other description | | Single-family home Duplex or multi-unit build Condominium or coopera Manufactured or mobile h | ative | | | Current value of the portion you own? |
| | Num | oer Street | Zip Code | | Land Investment property Timeshare Other | | | Describe the nature o interest (such as fee s the entireties, or a life | simple, tenancy by |
| | , | Salo | _, 5530 | Wh | o has an interest in the | property? Check | k | Check if this is co (see instructions) | mmunity property |
| | | | | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or | • | | | |
| | | | | | At least one of the debtor er information you wish perty identification num | to add about tl | his iter | n, such as local | |

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| Debtor 1 | | Middle Name | Mack Last Namo | Case numbe | r (if known) | |
|-----------|--|--|--|------------------|--|---|
| 1.3Stre | First Name et address, if available, or other de | scription | Last Name nat is the property? Check all that I single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | t apply. | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Describe the nature of interest (such as fee sthe entireties, or a life.) | imple, tenancy by |
| you ha | the dollar value of the portion yve attached for Part 1. Write th | pro ou own for all at number her | | about this item, | | |
| you own t | hat someone else drives. If you lea ins, trucks, tractors, sport utility ve | se a vehicle, als | n any vehicles, whether they are so report it on Schedule G: Execut cles | - | - | |
| 3.1 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community instructions) | nd another | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community instructions) | nd another | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |

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| | Jasmine First Name | Middle Name | Mack Last Name | Case number | er (irknown) | |
|------------------------------|--|--------------------|---|--|---|--|
| 0 0 | | IVIII GUIE INAITIE | | | D I d. d I | .1.' |
| 3.3 | Make | | Who has an interest in the prop one. | erty? Check | | claims or exemptions. Pured claims on Schedule |
| Model: Year: Approxima | | | | | | nied claims on <i>Scriedule</i> nims Secured by Property |
| | Approximate mileage: | | Debtor 1 only | | ordanoro rimo riaro dia | anno occarca zy r roporty |
| | Approximate imoage. | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | | entire property? | portion you own? |
| | | | At least one of the debtors and | d another | | |
| | | | Check if this is community | property (see | | |
| | | | instructions) | | | |
| 3.4 | Make | | Who has an interest in the prop | erty? Check | Do not deduct secured | claims or exemptions. P |
| Model: Year: | Model: | | one. | | the amount of any secu | |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | nims Secured by Property |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | | entire property? | portion you own? |
| | | | At least one of the debtors and | d another | | |
| | | | Check if this is community | property (see | | |
| | | | I CHECK II LIIIS IS COIIIIIIUIII I | | | |
| Exar | | | instructions) er recreational vehicles, other vehicles, including vessels, snowmobiles, motor | icles, and acce | | |
| Exar | nples: Boats, trailers, motors, No Yes Make | | instructions) er recreational vehicles, other vehit, fishing vessels, snowmobiles, moto Who has an interest in the prop | icles, and acce rcycle accessori | Do not deduct secured | • |
| Exar | nples: Boats, trailers, motors, No Yes Make Model: | | who has an interest in the propone. | icles, and acce rcycle accessori | Do not deduct secured the amount of any secu | ıred claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors, No Yes Make Model: Year: | | instructions) er recreational vehicles, other vehit, fishing vessels, snowmobiles, moto Who has an interest in the propone. Debtor 1 only | icles, and acce rcycle accessori | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors, No Yes Make Model: | | who has an interest in the propone. | icles, and acce rcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Property Current value of the |
| Exar | nples: Boats, trailers, motors, No Yes Make Model: Year: | | instructions) er recreational vehicles, other vehit, fishing vessels, snowmobiles, moto Who has an interest in the propone. Debtor 1 only | icles, and acce rcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule iims Secured by Property |
| Exar | nples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: | | who has an interest in the propone. Debtor 1 only Debtor 2 only | icles, and accerrcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the |
| Exar | nples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: | | who has an interest in the propone. Debtor 1 only Debtor 1 and Debtor 2 only | icles, and accerroycle accessorients erty? Check d another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the |
| Exar | nples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: | | who has an interest in the propone. Debtor 1 only Debtor 2 only At least one of the debtors and | icles, and accerroycle accessorients erty? Check d another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Property Current value of the |
| Exar 4.1 | nples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: | | who has an interest in the propone. Debtor 1 only Debtor 2 only At least one of the debtors and | icles, and accerricycle accessorial erty? Check dianother property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the portion you own? |
| Exar 4.1 | mples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | instructions) er recreational vehicles, other vehict, fishing vessels, snowmobiles, motor Who has an interest in the propone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions) | icles, and accerricycle accessorial erty? Check dianother property (see | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule |
| Exar 4.1 | mples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | instructions) er recreational vehicles, other vehict, fishing vessels, snowmobiles, motor Who has an interest in the propone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and instructions) Who has an interest in the propone. | icles, and accerricycle accessorial erty? Check dianother property (see | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. P |
| Exar 4.1 | mples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | instructions) er recreational vehicles, other vehit, fishing vessels, snowmobiles, motor Who has an interest in the propone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and instructions) Who has an interest in the propone. | icles, and accerricycle accessorial erty? Check dianother property (see | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule |
| Exar 4.1 | mples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | who has an interest in the propone. Debtor 1 only Debtor 2 only At least one of the debtors and instructions) Who has an interest in the propone. Debtor 1 and Debtor 2 only Check if this is community prinstructions) Who has an interest in the propone. Debtor 1 only | icles, and accerricycle accessorial erty? Check dianother property (see | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. P tred claims on Schedule hims Secured by Property |
| Exar 4.1 | mples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | who has an interest in the propone. Debtor 1 and Debtor 2 only At least one of the debtors and instructions) Who has an interest in the propone. Debtor 1 and Debtor 2 only At least one of the debtors and instructions) Who has an interest in the propone. Debtor 1 only Debtor 2 only | icles, and accerroycle accessorial erty? Check dianother property (see erty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. P ared claims on Schedule hims Secured by Property Current value of the |
| Exar 4.1 | mples: Boats, trailers, motors, No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | who has an interest in the propone. Check if this is community pinstructions) Who has an interest in the propone. Debtor 1 and Debtor 2 only At least one of the debtors and instructions) Who has an interest in the propone. Debtor 1 only Debtor 2 only Debtor 1 only | icles, and accerricycle accessoria erty? Check d another property (see erty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | claims or exemptions. Pured claims on Schedule laims Secured by Property Current value of the |

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Mack Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods and Furniture \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Consumer Electronics \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$355.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1155.00 for Part 3. Write that number here

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Mack Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: TCF Bank \$0.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Jasmine | | Mack | Case number (if known) | |
|------|--|--|----------------------------|---|---|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer | checks, promissory no | tes, and money orders. | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in II | | . thrift savings accounts | s, or other pension or profit-sharing plans | |
| | ✓ No | , =, | , | , or once particular or promise and promise | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | | | | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, public Electric: | | | |
| | _ | | - | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | - |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract for | or a periodic payment of money to | you, either for life or fo | r a number of years) | |
| | ✓ No ☐ Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debto | or 1 Jasmine | | Mack | Case number (if known) | |
|------------|--|--|--|--|--|
| 0.4 | First Name | Middle | | | |
| 24. | | in education IRA, in an acc 530(b)(1), 529A(b), and 529 | count in a qualified ABLE program, or u (b)(1). | inder a qualified state tuition program. | |
| | ✓ No Yes | Institution name and descri | ption. Separately file the records of any into | erests.11 U.S.C. § 521(c): | |
| | | | | | |
| | | | | | |
| 25. | | able or future interests in p or your benefit | property (other than anything listed in l | line 1), and rights or powers | |
| | ✓ No | | | | |
| | Yes. Desc | cribe | | | |
| 26. | | | secrets, and other intellectual propert | | |
| | No No | emet domain names, websit | es, proceeds from royalties and licensing a | greements | |
| | Yes. Desc | ribe | | | |
| 27. | Licenses, fra | nchises, and other general | Lintangibles | | |
| | Examples: Bu | | ses, cooperative association holdings, liqu | or licenses, professional licenses | |
| | ✓ No | 26 . | | | |
| | Yes. Desc | mbe | | | |
| | | | | | |
| | | | | | |
| Mon | ey or propei | rty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| | | | | | portion you own? |
| | Tax refunds o | | | | portion you own? Do not deduct secured |
| | Tax refunds or No | wed to you specific information | 2016 Refund | Federal: | portion you own? Do not deduct secured |
| | Tax refunds or No Yes. Give sabou | wed to you specific information It them, including whether already filed the returns | 2016 Refund | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds or No Yes. Give s about you a and to | wed to you specific information It them, including whether already filed the returns Ithe tax years | 2016 Refund | | portion you own? Do not deduct secured claims or exemptions. \$3072.00 |
| 28. | Tax refunds on No Yes. Give sabout you a and sand services. Past | wed to you specific information t them, including whether already filed the returns the tax years | 2016 Refund spousal support, child support, maintenar | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$3072.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabou you a and to Family suppor Examples: Past | wed to you specific information It them, including whether already filed the returns Ithe tax years | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$3072.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabou you a and to Family suppor Examples: Past | wed to you specific information t them, including whether already filed the returns the tax years | | State: Local: nce, divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$3072.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabou you a and to Family suppor Examples: Past | wed to you specific information It them, including whether already filed the returns Ithe tax years | | State: Local: nce, divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$3072.00 \$0.00 t \$0.00 |
| 28. | Tax refunds or No Yes. Give sabou you a and to Family suppor Examples: Past | wed to you specific information It them, including whether already filed the returns Ithe tax years | | State: Local: nce, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$3072.00 \$0.00 \$0.00 t \$0.00 |
| 28. | Tax refunds or No Yes. Give sabou you a and to Family suppor Examples: Past | wed to you specific information It them, including whether already filed the returns Ithe tax years | | State: Local: ace, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$3072.00 \$0.00 \$0.00 t \$0.00 \$0.00 |
| 28. 29. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, seepecific information | | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$3072.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds or No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, seepecific information | spousal support, child support, maintenar | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$3072.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information It them, including whether already filed the returns the tax years It It due or lump sum alimony, It Is specific information | spousal support, child support, maintenar | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$3072.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Jasmine | | Mack | Case number (if known) | |
|------|---|---------------------------|--|--|--|
| | First Name | Middle Name | e Last Name | | |
| 31. | Interests in insurance paramples: Health, disabil | | ealth savings account (HSA); credit, | nomeowner's, or renter's insurance | |
| | Yes. Name the insura of each policy and list | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | If you are the beneficiary property because someo No | of a living trust, expect | n someone who has died proceeds from a life insurance police | cy, or are currently entitled to receive | |
| 33. | | | you have filed a lawsuit or made surance claims, or rights to sue | a demand for payment | |
| | No Yes. Describe | | | | |
| 34. | Other contingent and uto set off claims | ınliquidated claims o | f every nature, including counter | claims of the debtor and rights | |
| | No Yes. Describe | | | | |
| 35. | Any financial assets yo | u did not already list | | | |
| | No Yes. Describe | | | | |
| 36. | | - | m Part 4, including any entries f | | \$3072.00 |
| Part | 5: Describe Any Bu | siness-Related Pr | operty You Own or Have an I | nterest In. List any real estate in Par | t1. |
| 37. | Do you own or have any | y legal or equitable in | nterest in any business-related p | | |
| | No. Go to Part 6. Yes. Go to line 38. | | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or | commissions you al | ready earned | | |
| | Yes. Describe | | | | |
| 39. | Office equipment, furni Examples: Business-relat | | e, modems, printers, copiers, fax m | achines, rugs, telephones, desks, chairs, elec | etronic devices |
| | No Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Jasmine | Mack Case numb | er (if known) |
|------|------------------------|--|--|
| 1.0 | First Name | Middle Name Last Name | |
| 40. | Machinery, fixtures, e | quipment, supplies you use in business, and tools of your trade | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| | | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| | _ | | |
| 12 | Interests in partnersh | ine or joint ventures | |
| 42. | | ips of Joint Ventures | |
| | ✓ No | Name of entity: | % of ownership: |
| | Yes. Give specific | namo di dilaiji | o o o o o o o o o o o o o o o o o o o |
| | information about them | | |
| | urom | | |
| | | | |
| 12 | Customor lists mailing | lists, or other compilations | |
| 45. | | nsts, or other compliations | |
| | ✓ No | | |
| | Yes. Do your lists in | nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | ☐ No | | |
| | Yes. Desc | ribe | |
| | | | |
| 44. | Any business-related | property you did not already list | |
| | ✓ No | | |
| | Yes. Give specific | | |
| | information | | |
| | | | |
| | | - | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | all of your entries from Part 5, including any entries for pages you have atta | |
| • | | | |
| Part | | arm- and Commercial Fishing-Related Property You Own or Have | e an Interest In. |
| | If you own or have an | interest in farmland, list it in Part 1. | |
| 46. | Do you own or have a | ny legal or equitable interest in any farm- or commercial fishing-related pr | operty? |
| | No. Go to Part 7. | | Current value of the |
| | Yes. Go to line 47. | | portion you own? Do not deduct secured claims |
| | ш | | or exemptions |
| 47. | Farm animals | | |
| | Examples: Livestock, p | oultry, farm-raised fish | |
| | ✓ No | | |
| | Yes. Describe | | |
| | _ | | |
| | | | |

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| Deb | tor 1 Jasmine First Name Middle | Nama | Mack | Case number (if known) | |
|----------------------------|--|--------------------------|---------------------------|--------------------------------|-------------|
| 10 | | e Name | Last Name | | |
| 48. | Crops-either growing or harvested | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 40 | | | | _ | |
| 49. | Farm and fishing equipment, implement | ts, macninery, ti | xtures, and tools of trad | e | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 50. | Farm and fishing supplies, chemicals, a | and feed | | | |
| 00. | _ | illa loca | | | |
| | No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51. | Any farm- and commercial fishing-relat | ed property you | did not already list | | |
| | No. | | | | |
| | Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| 50 A | dd the dollar value of all of your entries f | rom Bort 6 incl | iding any antrios for no | ree you have attached | |
| | art 6. Write that number here | • | | - | <u> </u> |
| > | | | | | |
| | | | | | |
| | | | | | |
| Part | 7: Describe All Property You Own | or Have an In | terest in That You Di | d Not List Above | |
| 53. | Do you have other property of any kind y | | ndy list? | | |
| | Examples: Season tickets, country club me | embership | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| 54. A | dd the dollar value of all of your entries f | rom Part 7. Writ | e that number here | | ▶ |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | List the Totals of Each Part of the | nis Form | | | |
| 55 | Part 1: Total real estate, line 2 | | | • | |
| 00. | | | | | |
| 56. | part 2 total vehicles, line 5 | | - | <u></u> | |
| | | ns, line 15 | ¢1155.00 | | |
| 57. F | Part 3: Total personal and household item | | | | |
| | • | | \$1155.00 | | |
| | Part 3: Total personal and household item Part 4: Total financial assets, line 36 | | \$3072.00 | _ | |
| 58. F | • | ine 45 | | - | |
| 58. F 59. | Part 4: Total financial assets, line 36 | | | | |
| 58. F 59. | Part 4: Total financial assets, line 36 Part 5: Total business-related property, li Part 6: Total farm- and fishing-related pro | operty, line 52 | | | |
| 58. F 59. 60. | Part 4: Total financial assets, line 36 Part 5: Total business-related property, li Part 6: Total farm- and fishing-related property and fishing-related, linest temperature in the second se | operty, line 52 ne 54 | \$3072.00 | | |
| 58. F 59. 60. | Part 4: Total financial assets, line 36 Part 5: Total business-related property, li Part 6: Total farm- and fishing-related pro | operty, line 52 ne 54 | \$3072.00 | | + \$4227.00 |
| 58. F 59. 60. | Part 4: Total financial assets, line 36 Part 5: Total business-related property, li Part 6: Total farm- and fishing-related property and fishing-related, linest temperature in the second se | operty, line 52 ne 54 | \$3072.00 | Copy personal property total ▶ | + \$4227.00 |
| 58. F 59. 60. | Part 4: Total financial assets, line 36 Part 5: Total business-related property, li Part 6: Total farm- and fishing-related property and fishing-related, linest temperature in the second se | operty, line 52 ne 54 | \$3072.00 | Copy personal property total | + \$4227.00 |

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| Fill in this infor | mation to identify your c | ase: | | |
|---------------------|---------------------------|-------------|----------------------|---|
| Debtor 1 | Jasmine | | Mack | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | , |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number | | | | |
| (If known) | | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | t 1: Identify the Property You Clair | n as Exempt | | | | | |
|-----|--|--|---|------------------------------------|--|--|--|
| 1. | . Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. | | | | | | |
| | You are claiming state and federal | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | | | | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(2 | 2) | | | | |
| 2. | For any property you list on Schedule A | /B that you claim as e | exempt, fill in the information below. | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| | Brief | 40.00 | _ | 735 ILCS 5/12-1001(b) | | | |
| | description: | \$0.00 | ₹ | | | | |
| | Checking account, TCF Bank | | 100% of fair market value, up to any | _ | | | |
| | Line from Schedule A/B: 17 | | applicable statutory limit | | | | |
| | Brief | | | 735 ILCS 5/12-1001(b) | | | |
| | description: | \$500.00 | \$500.00 | | | | |
| | Misc. Household Goods and Furniture | | 100% of fair market value, up to any | _ | | | |
| | Line from | | applicable statutory limit | | | | |
| | Schedule A/B: 06 | | | | | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | | |

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| Debtor 1 | Jasmine | N | Иаск | Case number (if known) | |
|----------|--|---|--------------------|---|------------------------------------|
| | First Name Mide | dle Name L | ast Name | | |
| Part 2: | Additional Page | | | | |
| line | of description of the property and on Schedule A/B that lists this perty | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exen | | Specific laws that allow exemption |
| Line | f cription: Used Clothing a from edule A/B: 11 | \$355.00 | 100% of fair ma | \$355.00 arket value, up to any utory limit | 735 ILCS 5/12-1001(a) |
| Line | f cription: Misc. Consumer Electronics of from edule A/B: 07 | \$300.00 | 100% of fair ma | \$300.00 arket value, up to any utory limit | 735 ILCS 5/12-1001(b) |
| Line | f cription: Federal, 2016 Refund from edule A/B: 28 | \$3,072.00 | 100% of fair ma | \$3,072.00 arket value, up to any utory limit | 735 ILCS 5/12-1001(b) |

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| | | | | <u>_</u> | | |
|--------------------------|-----------------------------------|-------------------------------|--|---|--|------------------------------------|
| Fill in this inf | ormation to identify your ca | ase: | | | | |
| Debtor 1 | Jasmine | | Mack | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case numbe (If known) | <u> </u> | | | | | |
| Officia | Form 106D | | | | | Check if this is an amended filing |
| Sched | ule D: Credit | ors Who Ha | ve Claims Secur | ed by Prop | erty | 12/15 |
| more space i | | | e are filing together, both are equinber the entries, and attach it to | | | |
| 1. Do any | creditors have claims s | ecured by your proper | ty? | | | |
| ✓ No | . Check this box and subr | mit this form to the court | with your other schedules. You have | ve nothing else to repo | ort on this form. | |
| Ye | s. Fill in all of the information | n below. | | | | |
| Part 1: Lis | st All Secured Claims | | | | | |
| for each | | ditor has a particular claim, | red claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports | Column C Unsecured portion If any |

this claim

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| E-11 · | a data ta Ca | and the state of t | | | | | | |
|-----------------------|--|--|--|--|--|--------------------------------------|--|---|
| FIII | n this infor | mation to identify your c | ase: | | | | | |
| Deb | tor 1 | Jasmine | | Mack | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | tor 2 | | | | | | | |
| (Spo | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unit | ted States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| | | | | (State) | | | | |
| Cas (If kn | e number | | | | | | | |
| | | 100E/E | | | | ☐ Ch | eck if this is a | n amended filing |
| <u>OII</u> | iciai F | orm 106E/F | | | | | | |
| Sc | chedi | ule E/F: Cre | editors Who | Have Unse | cured Claims | | | 12/15 |
| othe Form clain | r party to n 106A/B) ns that are entries in t | any executory contract and on Sc <i>hedule G: Exe</i> e listed in Sc <i>hedule D:</i> (| s or unexpired leases that ecutory Contracts and Une Creditors Who Hold Claims | could result in a claim expired Leases (Official Secured by Property. I | ns and Part 2 for creditors wit . Also list executory contracts form 106G). Do not include a f more space is needed, copy top of any additional pages, v | on Sched ny credito the Part y | dule A/B: Proports with particular with partic | perty (Official ally secured it out, number |
| Par | t 1: List | All of Your PRIORIT | Y Unsecured Claims | | | | | |
| 1. | Do any c | reditors have priority ur | nsecured claims against y | ou? | | | | |
| | ✓ No. | Go to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, ide As much Continua | ntify what type of claim it as possible, list the claims tion Page of Part 1. If mo | is. If a claim has both priori | ty and nonpriority amount ding to the creditor's nam particular claim, list the ot | | both priori | ty and nonprio | ority amounts. |
| | (i oi ali e | chianation of each type of | ciaiiii, see tile ilistructions | | tion bookiet.) | Total | Driority | Nonpriority |

claim

amount

amount

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Debtor 1 Jasmine Mack Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Autovest, L.L.C. \$8,896.83 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 2247 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Michigan 48037 Southfield City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: V Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ 17-M1-109779 Is the claim subject to offset? Yes CB/VICSCRT 4.2 \$171.00 Last 4 digits of account number Nonpriority Creditor's Name 220 W SCHROCK RD When was the debt incurred? 1/2017 Number As of the date you file, the claim is: Check all that apply. Contingent WESTERVILLE Ohio 43081 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes CCB/FE21CC \$222.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/2017 PO Box 63 Street Number As of the date you file, the claim is: Check all that apply. Contingent Kankakee Illinois 60901 Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts CreditCard Is the claim subject to offset? Other. Specify _ No Yes

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 Debtor 1 First Name
 Jasmine First Name
 Mack Last Name
 Case number (if known)

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | on Page | |
|--------|--|---|-------------|
| | After listing any entries on this page, number them beginning w | vith 4.5, followed by 4.6, and so forth. | Total claim |
| 4.4 | CCB/ULTA Nonpriority Creditor's Name 1000 Remington Blvd Number Street | Last 4 digits of account number 5851 When was the debt incurred? 12/2016 As of the date you file, the claim is: Check all that apply. | \$272.00 |
| | Bolingbrook Illinois 60440 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard | |
| 4.5 | City of Chicago Department of Revenue Nonpriority Creditor's Name 121 North LaSalle Street Number Street Chicago Illinois 60602 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Last 4 digits of account number When was the debt incurred? | \$88.00 |
| 4.6 | DEPT OF ED/NAVIENT Nonpriority Creditor's Name PO BOX 9635 Number Street WILKES BARRE Pennsylvania 18773 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number | \$3,946.00 |

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 Debtor 1 First Name
 Jasmine First Name
 Mack Last Name
 Case number (if known)

| | After listing any entries on this page, number them beginning | with 4.5. followed by 4.6. and so forth. | Total claim |
|-----|--|--|-------------|
| 4.7 | DEPT OF ED/NAVIENT Nonpriority Creditor's Name PO BOX 9635 Number Street | Last 4 digits of account number 0401 When was the debt incurred? 4/2011 As of the date you file, the claim is: Check all that apply. | \$2,935.00 |
| | WILKES BARRE Pennsylvania 18773 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| 4.8 | DEPT OF ED/NAVIENT Nonpriority Creditor's Name PO BOX 9635 Number Street WILKES BARRE Pennsylvania 18773 | Last 4 digits of account number 0611 When was the debt incurred? 6/2013 As of the date you file, the claim is: Check all that apply. Contingent | \$2,575.00 |
| | City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | Unliquidated | |
| r 1 | Is the claim subject to offset? No Yes | Other. Specify | |
| 4.9 | DEPT OF ED/NAVIENT Nonpriority Creditor's Name PO BOX 9635 Number Street | Last 4 digits of account number 0428 When was the debt incurred? 4/2009 As of the date you file, the claim is: Check all that apply. Contingent | \$1,876.00 |
| | WILKES BARRE Pennsylvania 18773 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | Unliquidated Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No | ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |

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Mack Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF ED/NAVIENT 4.10 \$1,251.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 4/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.11 DEPT OF ED/NAVIENT \$1,219.00 Last 4 digits of account number 0328 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 3/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.12 \$1,167.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No Yes

Is the claim subject to offset?

Other. Specify

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Debtor 1 Jasmine Mack Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF ED/NAVIENT 4.13 \$545.00 Last 4 digits of account number 0119 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.14 ENHANCED RECOVERY CO L \$328.00 Last 4 digits of account number 4668 Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 4/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: TMOBILE **✓** No Yes MONTGOMERYWD 4.15 \$134.00 Last 4 digits of account number Nonpriority Creditor's Name 1112 7th Ave. When was the debt incurred? 11/2015 Number As of the date you file, the claim is: Check all that apply. Contingent 53566 Monroe Wisconsin Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No Yes

Is the claim subject to offset?

Other. Specify _

CreditCard

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Debtor 1 Jasmine Mack Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 SYNCB/OLDNAV \$197.00 Last 4 digits of account number 4219 Nonpriority Creditor's Name P.O. BOX 29116 When was the debt incurred? 1/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent SHAWNEE MISSIO Kansas 66201 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify __ CreditCard Is the claim subject to offset? **✓** No Yes 4.17 TARGET/TD \$220.00 Last 4 digits of account number 0921 Nonpriority Creditor's Name PO BOX 673 When was the debt incurred? 2/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent MINNEAPOLIS Minnesota 55440 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes THE BUREAUS INC 4.18 \$750.00 Last 4 digits of account number Nonpriority Creditor's Name 1717 CENTRAL ST When was the debt incurred? 4/2013 Number As of the date you file, the claim is: Check all that apply. Contingent **EVANSTON** 60201 Illinois Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No

Yes

Is the claim subject to offset?

Other. Specify ___

001 Collection; Collecting for

ORIGINAL CREDITOR: MEDICAL

PAYMENT DATA

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| Debtor | 1 Jasmine First Name | | Middle Name | Mack Last Name | Case number (if known) | | |
|----------|---|------------------------------------|---|--|--|--|--|
| Part 3: | List Others to E | Be Notified A | bout a Debt That Yo | u Already Listed | | | |
| co cr | llection agency is t llection agency her | rying to colle re. Similarly, i | ct from you for a debt yor f you have more than or | ou owe to someone else, line creditor for any of the de | that you already listed in Parts 1 or 2. For example, if a st the original creditor in Parts 1 or 2, then list the ebts that you listed in Parts 1 or 2, list the additional arts 1 or 2, do not fill out or submit this page. | | |
| | ame | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| _ | 1990 E Algonquin Rd # 180 Number Street | | | Line 4.1 of (Ch | Part 1: Creditors with Priority Unsecured Claims | | |
| Nı | | | one): | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Sc | chaumburg | Illinois | 60173 | Last 4 digits of account | number | | |
| Ci | ity | State | Zip Code | | | | |

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Debtor 1 Jasmine Mack Case number (if known)
First Name Middle Name Last Name

| THISTING | ne widde warie Last warie | | |
|--------------------------|---|---------|---------------------------------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | s for s | tatistical reporting purposes o |
| | | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 |
| | amount here. 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | oe. Total. Add lilles oa tillough od. | oe. | |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$15,514.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write | 6i. | \$11,278.83 |
| | that amount here. | | |
| | 6j. Total. Add lines 6f through 6i. | 6i. | \$26,792.83 |

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| Fill in this infor | mation to identify your ca | ase: | | |
|---------------------|----------------------------|-------------|-----------------|-------------|
| Debtor 1 | Jasmine | | Mack | |
| | First Name | Middle Name | Last N | lame |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last N | lame |
| United States B | ankruptcy Court for the: | Northern | District of III | |
| Case number | | | (8 | State) |
| (If known) | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | | טט | Cument | Paye 33 | 0172 |
|------------|---------------|--|--------------------------------|-----------------------|----------------|--|
| Fill in th | is infori | mation to identify your o | ase: | | | |
| Debtor 1 | 1 | Jasmine | | Mack | | _ |
| Debtor 2 | 2 | First Name | Middle Name | Last Nar | ne | |
| (Spouse, i | f filing) | First Name | Middle Name | Last Nar | ne | _ |
| United S | States B | ankruptcy Court for the: | Northern | District of Illin | | _ |
| Case nu | ımber | | | (Sta | ate) | |
| (If known) | | | | | | Check if this is an amended filing |
| Offic | ial | Form 106H | | | | anondod illing |
| | | | 1.1.4 | | | |
| Scne | eauic | e H: Your Cod | leptors | | | 12/15 |
| tnown). | you ha No Yes | r every question. ve any codebtors? (If y | ou are filing a joint case, do | not list either spo | ouse as a code | |
| | ho, Lou | isiana, Nevada, New Me | kico, Puerto Rico, Texas, Wa | | | nmunity property states and territories include Arizona, California, |
| | _ | Go to line 3. | er spouse, or legal equival | lont livo with vo | Lat the time? | |
| ш | | Vo | er spouse, or legal equival | ierit iive wiii i yot | at the time: | |
| | | Yes. In which communi | y state or territory did you | live? | Fi | Il in the name and current address of that person. |
| | | Name of your spouse, | ormer spouse, or legal equi | valent | | |
| | | Number Street | | | | |
| | | City | State | | Zip Code | |
| 3. In (| Column | 1, list all of your code | otors. Do not include your | spouse as a co | debtor if your | spouse is filing with you. List the person shown in line 2 |

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. | | | | | 9 | | |
|--|---|---|-----------------------|---------|-----------------|----------------|---|
| Debtor 2 Spouse, if filing First Name | Fill in this information to identify | your case: | | | | | |
| Debtor 2 Sprove, if string First Name | | | | | | | |
| United States Bankruptcy Court for the case number (if known) Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If you are separated and not filling ignity, and your spouses is living with you, include information about your spouse. If you are separated and not filling with you, do not include information about your spouse is not filling with you, do not include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your name and number (if known). Answer every question. Part 1: Describe Employment If you have more than one job, altanch a separate shoet of the status are proposed with information about additional employers. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Employer's address Only State Zip Code Oilly State Zip Code Oi | | Middle Name | Last N | lame | | Che | ck if this is: |
| United States Bankruptcy Court for the: Northern | | Middle Name | Last N | lame | | | An amended filing |
| Case number With recent Case number Cas | | | | | | | A supplement showing post-petition chapter 1: |
| Case number (if known) Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, sessional, or sef-employed work. Cocupation Self-employment Employer's name Employer's name Employer's name Employer's name Employer's address Occupation Self-employment In with the page in the space in the | | Northern | | | <u></u> | | |
| Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouses. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information about 4 dolftonal employers. If you have more than one job, attach a separate page with information about additional employers. Include part time, sessonal, or self-employed work. Occupation Balf-employment Employer's name Employer's name Employer's name Employer's address Find the policy of the | | | (C | olulo) | | _ | |
| Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about you spouse. If you are separated and your spouse is not filing with you, do not include information about you spouse. If you a separate sheet to this form. On the top of any additional pages, write your name and number (if known). Answer every question. Part 1: Describe Employment I. Fill In your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation may include student or homemaker, if it applies. City State Zip Code City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Employer's address City State Zip Code City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-spouse unless you are separated and the properties of that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll 2. \$0.00 deductions, If not paid monthly, calculate what the monthly wage would 3. Estimate and list monthly overtime pay. | (If known) | | | | | l | MM / DD / YYYY |
| Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about you spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or salf-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Debtor 1 Debtor 2 Employed | Official Form 106I | | | | | | |
| responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouses. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation Employer status Debtor 1 Debtor 2 Employed Employed Debtor 2 Employed Debtor 2 Employed Debtor 2 Employed Debtor 2 Employed Debtor 3 Employed Debtor 4 Employed Debtor 5 Employed Debtor 6 Debtor 7 Employed Debtor 7 Employed Debtor 8 Employed Debtor 9 Employer's name Employer's address Number Street Total Page 10 Debtor 1 Debtor 2 Total Page 10 Debtor 2 Total Page 10 Debtor 2 Total Page 10 Debtor 1 Debtor 2 Total Page 10 Debtor 3 Number Street Number Street Total Page 10 Debtor 1 Debtor 2 Total Page 10 Debtor 3 Debtor 4 Debtor 5 Debtor 6 Debtor 9 | Schedule I: Your In | come | | | | | 12/1 |
| Employed | information about your spouse. I spouse. If more space is needed number (if known). Answer ever | If you are separated and I, attach a separate she y question. | d your spous | se is n | ot filing w | ith you, do | not include information about your |
| Include part time, seasonal, or self-employed work. Occupation More more maker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3 | Fill in your employment | | Debtor 1 | | | | Debtor 2 |
| If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Employer's address Number Street | | | | | | | |
| Include part time, seasonal, or self-employer's name Employer's address Cocupation may include student or homemaker, if it applies. Employer's address | If you have more than one job, | Employment status | ✓ Emplo | yed | | | Employed |
| employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Number Street | | | Not Er | mployed | t | | Not Employed |
| Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. City State Zip Code City State Zip Code | | Occupation | Self-emplo | oyment | | | |
| Employer's address Number Street Number Street | Include part time, seasonal, or | • | <u>·</u> | | | | |
| Occupation may include student or homemaker, if it applies. Number Street Number Street | | | - | | | | - <u> </u> |
| How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | Employer's address | Number Sti | reet | | | Number Street |
| How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. + \$0.00 | | | | | | | |
| Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$0.00 | | | City | | State | Zip Code | City State Zip Code |
| Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$0.00 | | | | | | | |
| spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse | Part 2: Give Details About M | Monthly Income | | | | | |
| If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$0.00 | | the date you file this forn | n. If you have | nothing | g to report f | or any line, v | write \$0 in the space. Include your non-filing |
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 2. \$0.00 \$0. | If you or your non-filing spouse hav | | combine the | informa | ation for all e | employers fo | r that person on the lines below. If you need |
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 2. \$0.00 | more space, attach a separate she | et to this form. | | | For Deb | tor 1 | |
| | deductions.) If not paid monthly | | | 2. | | \$0.00 | non-пiing spouse |
| | 3. Estimate and list monthly ove | rtime pay. | | 3. | | + \$0.00 | |
| 4. Calculate gross income. Add line 2 + line 3. 4. \$0.00 | 4. Calculate gross income. Add I | ine 2 + line 3. | | 4. | | \$0.00 | |

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| Debto | or 1 Jasmine First Name | | Mack Last Name | Case numbe known) | er <i>(if</i> | | |
|-----------------------|--|--|-------------------|---------------------------|-----------------------------------|-------|-------------------------|
| | | dat ramo | | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Cop | oy line 4 here | | → 4. | \$0.00 | | | |
| 5. Lis t | t all payroll deduc | | | | | | |
| 5a. | . Tax, Medicare, a | nd Social Security deductions | 5a. | \$0.00 | | | |
| 5b. | . Mandatory contr | ibutions for retirement plans | 5b. | \$0.00 | | | |
| 5c. | . Voluntary contrib | outions for retirement plans | 5c. | \$0.00 | | | |
| 5d | . Required repaym | ents of retirement fund loans | 5d. | \$0.00 | | | |
| 5e. | Insurance | | 5e. | \$0.00 | | | |
| 5f. | Domestic support | tobligations | 5f. | \$0.00 | | | |
| 5g. | . Union dues | | 5g. | \$0.00 | | | |
| 5h. | . Other deduction: | s. Specify: | 5h. | + \$0.00 | + | | |
| 6. Add +5h. | d the payroll dedu | ctions. Add lines 5a + 5b + 5c + 5d + 5e +5 | f + 5g 6. | \$0.00 | | | |
| 7. Cal | culate total mont | hly take-home pay. Subtract line 6 from line | e 4. 7. | \$0.00 | | | |
| 8. List | t all other income | regularly received: | | | | | |
| 8a. | business, profess | • | | | | | |
| | | t for each property and business showing linary and necessary business expenses, and net income | l 8a. | \$773.50 | | | |
| 8b. | . Interest and divid | | 8b. | | | | |
| | | ayments that you, a non-filing spouse, or | | | | | |
| | | pousal support, child support, maintenance, and property settlement. | 8c. | \$0.00 | | | |
| 8d | . Unemployment c | ompensation | 8d. | \$0.00 | | | |
| 8e. | Social Security | | 8e. | \$0.00 | | | |
| | Include cash assist cash assistance that | at assistance that you regularly receive tance and the value (if known) of any non- at you receive, such as food stamps (benefits tental Nutrition Assistance Program) or | S 8f. | \$0.00 | | | |
| 8g. | . Pension or retire | ment income | 8g. | \$0.00 | | | |
| 8h. | . Other monthly in | come. Specify: | 8h. | + \$0.00 | + | | |
| | _ | Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g - | + 8h. 9. | \$773.50 | |] | |
| | | ncome. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing sp | 10. pouse | \$773.50 | + |] = | \$773.50 |
| Inc frie | clude contributions inds or relatives. | lar contributions to the expenses that you from an unmarried partner, members of your nounts already included in lines 2-10 or amounts. | household, y | our dependents, your room | | | |
| Sp | ecify: | | | | | 11. + | \$0.00 |
| | | the last column of line 10 to the amount in the Summary of Schedules and Statistical Su | | | | 12. | \$773.50 |
| | | | | | | | Combined monthly income |
| 13. D c | you expect an in | crease or decrease within the year after | you file this f | orm? | | | |
| | Yes. Explain: | | | | | | |
| L | 163. Expiditi. | | | | | | |

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| Debtor 1Jasmine | Mack | | Case number (if | | | | | |
|---|---------------------|----------|-----------------|------|----------|---|--|----------|
| First Name | Middle Name | Last | Name | | known) | · | | <u> </u> |
| Official Form 1061. Addition | | | | | | | | |
| 8a.Net income from rental property and from operating a business, profession, or farm | | | | | | | | |
| 8a.1 Business and Self Employment - | Door Dash | Debtor 1 | Debtor 2 | | | | | |
| Gross receipts (before all deductions) | | \$773.50 | | | | | | |
| Ordinary and necessary operating expe | enses | -\$0.00 | | _ | | | | |
| Net monthly income from a business, | profession, or farm | \$773.50 | | Copy | \$773.50 | _ | | _ |

Official Form 106l Schedule I: Your Income page 3

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| | | Do | cument Page 37 of | 72 | | |
|---------------------------------|--|---|---|-------------------|--|-------------|
| Fill in this infor | mation to identify y | our case: | | | | |
| Debtor 1 | Jasmine First Name | Middle Name | Mack Last Name | | | |
| Debtor 2 | | | | Check if this is: | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filin | g | |
| | ankruptcy Court for | the: Northern | District of Illinois (State) | 1 1 1 1 1 1 | lowing post-petiti he following date: | • |
| Case number (If known) | | | | MM / DD / YYYY | | |
| | Form 106 e J: Your E | | | _ | | 12/15 |
| information. If (if known). Ans | | ded, attach another sheet to t n. | e are filing together, both are equ his form. On the top of any addition | | | umber |
| 1. Is this a join | | | | | | |
| | to line 2 | | | | | |
| | | | | | | |
| Yes. Do | oes Debtor 2 live in | n a separate household? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 mi | ust file Official Forms 106J-2, Ex | penses for Separate Household of D | ebtor 2. | | |
| 2. Do you have | e dependents? | ✓ No | | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depende with you? | ent live |
| | enses include f people other | ✓ No | | | | |
| yourself and dependents | _ | Yes | | | | |
| Part 2: Estir | nate Your Ongo | ing Monthly Expenses | | | | |
| | f a date after the l | | ss you are using this form as a sup supplemental Schedule J, check t | | | |
| | - | non-cash government assistan ded it on Sc <i>hedule I: Your Inco</i> | | | You | ur expenses |
| | or home ownersh or the ground or lot. | | . Include first mortgage payments a | nd | 4. | \$0.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real es | state taxes | | | | 4a | \$0.00 |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Mack First Name
 Mack Last Name
 Case number (if known)

| First Name Middle Name Last Name | | |
|--|-------------|---------------|
| | | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$0.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$157.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 7. | \$337.00 |
| 8. Childcare and children's education costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$70.00 |
| 10. Personal care products and services | 10. | \$31.00 |
| 11. Medical and dental expenses | 11. | \$50.00 |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$223.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 1 5a | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$0.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted | d from | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19. Other payments you make to support others who do not live with you. Specify: | 10 | #0.00 |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yo | 19. | \$0.00 |
| 20a. Mortgages on other property | 20a | \$0.00 |
| 20b. Real estate taxes. | 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20d | \$0.00 |
| | | |

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| Debtor 1 | Jasmine | | Mack | Case number (if known) | | |
|----------|------------------------|---|-----------|------------------------|----------|-----------|
| | First Name | Middle Name | Last Name | · | | |
| 21.Other | Specify: | | | | 21 | \$0.00 |
| | | | | | | |
| | ulate your monthly ex | • | | | | \$868.00 |
| | Add lines 4 through 21 | | | | | \$0.00 |
| | Copy line 22 (monthly | | | \$868.00 | | |
| 22c. A | Add line 22a and 22b. | 22. | | | | |
| 23.Calcu | late your monthly ne | t income. | | | | |
| 23a. (| Copy line 12 (your com | bined monthly income) from | | 23a | \$773.50 | |
| 23b. (| Copy your monthly exp | penses from line 22 above. | | | 23b | \$868.00 |
| | | expenses from your monthly in | ncome. | | | (\$94.50) |
| | The result is your mon | thly net income. | | 23c | | |
| mort | | t to finish paying for your car l ase or decrease because of a r | - | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this infor | mation to identify your c | ase: | | | |
|---------------------------|---------------------------|-------------|----------------------|--|--|
| Debtor 1 | Jasmine | | Mack | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | ankruptcy Court for the: | Northern | District of Illinois | | |
| | | | (State) | | |
| Case number (If known) | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | 1: Sign Below | | | | | | |
|-----|--|---|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| | ✓ No | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. | | | | | | |
| × | /s/ Jasmine Mack | × | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | |
| | Date 5/9/2017 MM/DD/YYYY | Date MM/DD/YYYY | | | | | |

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| Fill in | n this ir | nformation | to identify your | case: | | | | | |
|-----------------|---------------|-------------|---------------------|---------------------|--|--------------------|-----------------|---------------------|-----------------------------------|
| Deb | tor 1 | Jasm | | | Mack | | | | |
| Deb | tor 2 | First | Name | Middle | Name Last Nar | me | | | |
| (Spot | use, if filin | ng) First | Name | Middle | Name Last Nar | me | | | |
| Unit | ed State | es Bankru | otcy Court for the: | Northern | District of Illin | | | | |
| Case (If kno | e numb | per | | | (0.0 | | | | |
| | · · | J | 107 | | | | | | Check if this is a amended filing |
| | | | m 107 | | | | | | amended ming |
| | | | | | for Individuals | | | | 12/1 |
| infor | matio | n. If more | | ed, attach a sep | narried people are filing parate sheet to this forr | | | | |
| Pari | 1: G | ive Deta | ils About Your | Marital Status | s and Where You Live | d Before | | | |
| 1. | What | t is your c | urrent marital st | atus? | | | | | |
| | | Married | | | | | | | |
| | ✓ | Not marrie | ed | | | | | | |
| 2. | Durir | ng the las | t 3 years, have y | ou lived anywhei | re other than where you l | live now? | | | |
| | | No | | | | | | | |
| | | Yes. List a | all of the places y | ou lived in the las | st 3 years. Do not include | where you live | now. | | |
| | | Dabtas d. | | | Dates Dahtes 4 lived | Dahtau O | | | Datas Dakton Olived |
| | | Debtor 1: | | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | | Same as | s Debtor 1 | | Same as Debtor 1 |
| | | | | | _ | | | | _ |
| | | Number S | treet | | From To | Number Stre | eet | _ | From To |
| | • | | | | | | | | |
| | | City | State | Zip Code | | City | State | Zip Code | |
| | | | | | | Same as | s Debtor 1 | | Same as Debtor 1 |
| | • | Number S | troot | | From | Number Stre | e et | | From |
| | | | | | То | | | | To |
| | | | | | | | | | |
| | _ | City | State | Zip Code | | City | State | Zip Code | |
| 3. | | | | | pouse or legal equivalentisiana, Nevada, New Mexico | | | - ' | |
| | | | idde Anzona, Gain | omia, idano, cou | isiana, Nevada, New Wexio | o, ruento rnoo, re | skas, washingto | ni, and wisconsin.) | |
| | ✓ No | | sure you fill out S | Schedule H: Your | Codebtors (Official Form | n 106H). | | | |

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Mack

Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$3000.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$10000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$8500.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Mack Debtor 1 Jasmine __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

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| or 1 | Jasmine | | | M | ack | Case number | (if known) |
|--------------------|---|--|--|--|---|--|---|
| | First Name | | Middle Name | La | st Name | | |
| nsi corp age | ders include your porations of which | relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; and the relatives; are relatives; and the relatives; are relatives; are relatives; are relatives; and the relatives; are relatives | any general partners an officer, director, p ness you operate as | s; relatives of any person in control | general partners; par , or owner of 20% or | tnerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to | an insider. | 5 | | | D ()) |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | No | | aranteed or cosigne | • | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | <u> </u> | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | I . |

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Mack Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished.

City

Zip Code

State

Property was attached, seized, or levied.

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| Debt | tor 1 Jasmine | Mack | Case number (if known) | |
|------|---|-----------------------------|---|-----------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, di accounts or refuse to make a payment because y | | bank or financial institution, set off any am | ounts from your |
| | Yes. Fill in the details. | | | |
| | Too. I ill ill the detaile. | | | |
| | | Describe the action th | ne creditor took Date action was taken | Amount |
| | Creditor's Name | _ | | - |
| | Number Street | _ | | |
| | - | _ Last 4 digits of account | number: XXXX- | |
| | City State Zip Code | _ | | |
| 12. | Within 1 year before you filed for bankruptcy, was appointed receiver, a custodian, or another offici | | possession of an assignee for the benefit o | f creditors, a court- |
| | ✓ No | | | |
| | Yes | | | |
| Part | List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, di | d you give any gifts with a | total value of more than \$600 per person? | |
| | No | | | |
| | Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | _ | | |
| | Number Street | _ | | |
| | City State Zip Code | _ | | |
| | Person's relationship to you | | | |
| | | | | |
| | Person to Whom You Gave the Gift | _ | | |
| | Number Street | _ | | |
| | | _ | | |
| | City State Zip Code Person's relationship to you | | | |
| | | | | |

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| Deb | | Jasmine | | Mack | Case number (if know | 7) | |
|------|--------------|---|----------------------|----------------------------|---------------------------------|----------------------|--------------------|
| | | First Name M | liddle Name | Last Name | | | |
| 14. | \A/i+ | hin 2 years before you filed for b | ankruntov did voi | ı aiyo any aifte or contri | butions with a total value o | f more than \$600 | to any charity? |
| 14. | WIL | | ankruptcy, did yo | a give any gints or contri | butions with a total value t | i more than \$600 | to any charity: |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details for each gi | ift or contribution. | | | | |
| | | Gifts or contributions to chariti | ies | Describe what you con | tributed | Date you | Value |
| | | that total more than \$600 | | | | contributed | |
| | | | | | | | |
| | | Charity's Name | | | | · | |
| | | | | | | | |
| | | | _ | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | City State | Zip Code | | | | |
| | | List Contain Lassas | | | | | |
| Part | 6: | List Certain Losses | | | | | |
| | | | | | | | |
| 15. | | nin 1 year before you filed for ba nbling? | nkruptcy or since | you filed for bankruptcy | , did you lose anything bec | ause of theft, fire, | other disaster, or |
| | gan | | | | | | |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | Describe the property you lost | and | Describe any insuranc | e coverage for the loss | Date of your | Value of property |
| | | how the loss occurred | | Include the amount that | insurance has paid. List | loss | lost |
| | | | | - | s on line 33 of <i>Schedule</i> | | |
| | | | | A/B: Property. | | | |
| | | | | | | | |
| Dart | 7. | List Certain Payments or Tra | anefere | | | | |
| | Incl | No | ion preparers, or cr | edit counseling agencies f | or services required in your ba | nkruptcy. | |
| | \checkmark | Yes. Fill in the details. | | | | | |
| | | | | Description and value | of any property | Date payment | Amount of |
| | | | | transferred | | or transfer was made | payment |
| | | Commend Lavy Firms | | A | | | Ф005 00 |
| | | Semrad Law Firm Person Who Was Paid | | Attorney's Fee - 335.00 | | 5/2/2017 | \$335.00 |
| | | 20 S. Clark Street | | | | | |
| | | Number Street | | | | | |
| | | 28th Floor | | | | | |
| | | | 60600 | | | | |
| | | Chicago Illinois City State | 60603 Zip Code | | | | |
| | | Oity Otato | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | None | C NI - L M | | | | |
| | | Person Who Made the Payment, it | T NOT YOU | | | | |
| | | | | | | | |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | City State | Zip Code | | | | |
| | | | | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Payment, it | f Not You | | | | |
| | | i sissii viilo ividae die i ayillelit, i | | | | | |

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| Deb ⁻ | | Jasmine | | Mack | Case number (if kn | own) | |
|------------------|----------|--|-----------------------|---|---------------------------|--|------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | hin 1 year before you filed o you deal with your credin not include any payment or | tors or to make payme | | our behalf pay or trans | sfer any property to a | nyone who promised to |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | Ш | res. i ili ili tile detalis. | | | | | |
| | | | | Description and value of a transferred | пу ргорегту | Date payment or transfer was made | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | City State | Zip Code | | | | |
| | | ude both outright transfers a transfers that you have alreated No Yes. Fill in the details. | | curity (such as the granting of a ent. | i security interest or mo | rtgage on your property | /). Do not include gifts |
| | | | | Description and value of a | ny Describe | any property or | Date |
| | | | | Description and value of a property transferred | | any property or s received or debts pa nge | |
| | | Person Who Received Trans | nsfer | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | City State Person's relationship to yo | Zip Code u | | | | |
| | | Person Who Received Trans | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to yo | Zip Code u | | | | |
| 19. | ben | hin 10 years before you file eficiary? ese are often called asset-pro | | you transfer any property to a | a self-settled trust or | similar device of whic | ch you are a |
| | | | , | | | | |
| | 뇓 | No | | | | | |
| | Ш | Yes. Fill in the details. | | | | | _ |
| | | | | Description and value of | the property transfer | ed | Date transfer was made |
| | | Name of trust | | | | | |

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Mack Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City

City

State

Zip Code

State

Zip Code

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Mack Debtor 1 Jasmine Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | | Jasmine | | | Mack | | Cas | se number <i>(i</i> | f known) | | |
|------|----------|---|----------------|----------------------|---------------------|--------------|-------------------|---------------------|----------------|---------------|----------------------------------|
| | | First Name | | Middle Name | Last Nar | me | | | | | |
| 26. | Hav | e you been a part | y in any judic | cial or administr | ative proceedin | g under | any environme | ntal law? Ir | ıclude settler | ments and ord | ders. |
| | | No Yes. Fill in the det | tails. | | | | | | | | |
| | _ | | | | Court or agency | y | | Nature | of the case | | Status of the case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | | | | | On appeal |
| | | Case number | | | NumberStreet | | | | | | Concluded |
| | | | | | City S | State | Zip Code | | | | |
| Part | 11: | Give Details Al | oout Your E | Business or Co | nnections to | Any Bu | siness | | | | |
| 27. | Witl | nin 4 years before | you filed for | bankruptcy, did | you own a busi | ness or | have any of the | following o | onnections t | o any busines | ss? |
| | | | | mployed in a tra | - | | - | full-time or p | oart-time | | |
| | | A member of A partner in a | | oility company (L | .LC) or limited lia | ability pa | artnership (LLP) | | | | |
| | | | - | anaging executiv | e of a corporati | on | | | | | |
| | | An owner of | at least 5% c | of the voting or e | quity securities | of a corp | poration | | | | |
| | ✓ | No. None of the a Yes. Check all tha | | | | r ooob b | ou oinoco | | | | |
| | Ц | 165. Officer all the | ат арріу аро | ve and illi li i lie | | | ure of the busine | ess | Employer I | dentification | number Do not |
| | | | | | | | | | include So | cial Security | number or ITIN. |
| | | Business Name | | | | | | | EIN. | | |
| | | Number Street | | | Name of a | account | ant or bookkee | per | Dates busi | ness existed | |
| | | City | State | Zip Code | _ | | | | From | То | |
| | | | | | | | | | | | |
| | | | | | Describe | the natu | ure of the busine | ess | | | number Do not number or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | City | State | Zip Code | Name of a | account | ant or bookkeeן | per | From | To | |
| | | Oity | State | Zip Code | | | | | From | To | |
| | | | | | | | | | | | |
| | | | | | Describe | the natu | ure of the busine | ess | | | number Do not number or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | Name of a | account | ant or bookkeeן | per | Dates busi | ness existed | |
| | | City | State | Zip Code | _ | _ 5 5 5 Will | | | From | То | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Deb | otor 1 Jasmine | | Mack | Case number (if known) |
|------|--------------------------------------|------------------------|-------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. | creditors, or other parties. | for bankruptcy, did yo | ou give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | ✓ No Yes. Fill in the details below | v. | | |
| | | | Date issued | |
| | | | | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | _ | |
| | City State | Zip Code | _ | |
| Pari | t 12: Sign Below | | | |
| | | fines up to \$250,000, | , | ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of Deb | | | Signature of Debtor 2 |
| | Ü | | | Date |
| | Date 5/9/2017 | | | |
| ı | Did you attach additional pages | to Your Statement of | Financial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)? |
| | ✓ No | | | |
| i | Yes | | | |
| ı | Did you pay or agree to pay some | eone who is not an at | torney to help you fill out b | ankruptcy forms? |
| ı | ✓ No | | | |
| i | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|----------------------|--|--|
| Debtor 1 | Jasmine | | Mack | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | | |
| | | | (State) | | |
| Case number (If known) | | | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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| Debto | r Jasmine | | Mack | Case number (if |
|---------|---|----------------------------|------------------------|---|
| 1 | First Name | Middle Name | Last Name | known) |
| Part 2: | List Your Unexpire | ed Personal Property Lease | es | |
| inform | ation below. Do not list | | leases are leases that | y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). |
| De | escribe your unexpired | personal property leases | | Will the lease be assumed? |
| Le | ssor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | |
| Le | ssor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | |
| Le | ssor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | |
| Le | ssor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | |
| Le | ssor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | _ |
| Le | ssor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | _ |
| Le | ssor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | _ |
| Part 3: | Sign Below | | | |
| | ler penalty of perjury, I perty that is subject to | | my intention about any | property of my estate that secures a debt and any personal |
| _ | /s/ Jasmine Mack | | *_ | |
| 5 | Signature of Debtor 1 | | Siç | gnature of Debtor 2 |
| [| Date 5/9/2017 MM/DD/YYYY | | Da | MM/DD/YYYY |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Jasmine Mack | | Case No. | |
|-------|---|--------------------------------------|---|-----------------------------|
| _ | Debtor | | | (If known) |
| | | | Chapter | Chapter 7 |
| 1. | DISCLOSURE OF C Pursuant to 11 U.S.C. § 329(a) and Fe compensation paid to me within one y | ed. Bankr. P. 2016(b), I certi | | venamed debtor(s) and that |
| | rendered or to be rendered on behalf of | | | |
| | For legal services, I have agreed to acc | eept | | \$1,353.24 |
| | Prior to the filing of this statement I ha | ave received | | \$0.00 |
| | Balance Due | | | \$1,353.24 |
| 2. | . The source of the compensation paid | to me was: | | |
| | ✓ Debtor | Other (specify) | | |
| 3. | . The source of the compensation paid | to me is: | | |
| | Debtor | Other (specify) | | |
| 4. | I have not agreed to share the abomembers and associates of my law | ve-disclosed compensation w firm. | n with any other person unless they | / are |
| | | firm. A copy of the agreeme | th a other person or persons who a ent, together with a list of the name | |
| 5. | . In return for the above-disclosed fee, I a. Analysis of the debtor's financ bankruptcy; | | al service for all aspects of the bank advice to the debtor in determining | |
| | b. Preparation and filing of any p | etition, schedules, stateme | nts of affairs and plan which may be | e required; |
| | c. Representation of the debtor a | t the meeting of creditors a | and confirmation hearing, and any a | djourned hearings thereof; |
| 6. | . By agreement with the debtor(s), the a | bove-disclosed fee does no | ot include the following services: | |
| | | | | |
| | | CERTIFIC | ATION | |
| | I certify that the foregoing is a complete tor(s) in this bankruptcy proceedings. | statement of any agreemen | nt or arrangement for payment to m | e for representation of the |
| | 5/9/2017 | | /s/ Chad Mizelle | |
| | Date | | Signature of Attorney | |
| | <u>-</u> | | Semrad Law Firm | |
| | | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Mack, Jasmine | Case No | |
|-----------------|--|---|--------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter7 |
| | VERIFICA | TION OF CREDITOR MAT | TRIX |
| Th knowledge | ne above named Debtors hereby verify that. | at the attached list of creditors is tr | rue and correct to the best of their |
| Date: | 5/9/2017 | /s/ Mack, Jasmir Mack, Jasmine Signature of Deb | |

DEPT OF ED/NAVIENT PO BOX 9635 WILKES BARRE, PA, 18773

THE BUREAUS INC 1717 CENTRAL ST EVANSTON, IL, 60201

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

CCB/ULTA 1000 Remington Blvd Bolingbrook, IL, 60440

CCB/FE21CC PO Box 63 Kankakee, IL, 60901

TARGET/TD PO BOX 673 MINNEAPOLIS, MN, 55440

SYNCB/OLDNAV P.O. BOX 29116 SHAWNEE MISSIO, KS, 66201

CB/VICSCRT 220 W SCHROCK RD WESTERVILLE, OH, 43081

MONTGOMERYWD 1112 7th Ave. Monroe, WI, 53566

Autovest, L.L.C. Po Box 2247 Southfield, MI, 48037

Shindler & Joyce 1990 E Algonquin Rd # 180 Schaumburg, IL, 60173 Case 17-14537 Doc 1 Filed 05/09/17 Entered 05/09/17 15:28:28 Desc Main Document Page 62 of 72

City of Chicago Department of Revenue P.O. Box 06152 Chicago, IL, 60606

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| Debtor 1 Jasmine First Name | | Mack Last Name | Case number (if known) | |
|--|--|--|---|--|
| to the second se | estions for Reporting Purpose | | | |
| ^{16.} What kind of debts do you have? | 16a. Are your debts primarily "incurred by an individua No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or i No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you | al primarily for a personal primarily for a pe | al, family, or househo iness debts are debts the operation of the b | ld purpose." that you incurred to obtain susiness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ENo. | | after any exempt prope distribute to unsecured | rty is excluded and administrative creditors? |
| 18. How many creditors do you estimate that you owe? | 1-49 50-99 100-199 200-999 | 1,000-5,000 5,001-10,00 10,001-25,0 | 0 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | 2500000C | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | Shamer . | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Pan 74 Sign Below | | | | |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill | | | |
| | out this document, I have obtain | a raid not pay or agree ned and read the notice | το pay someone who required by 11 U.S.C | is not an attorney to help me fill 2. § 342(b). |
| | I request relief in accordance wit | th the chapter of title 1° | I, United States Code | e, specified in this petition. |
| | I understand making a false stat connection with a bankruptcy of both. 18 U.S.C. §§ 152, 1341, 1 | ase can result in fines u | perty, or obtaining mo p to \$250,000, or im | oney or property by fraud in prisonment for up to 20 years, or |
| | /s/ Jasmine Mack Signature of Debtor 1 | //r | Signature of Deb | tor 2 |
| Del 1981 - Statut de la 1985 de l | Executed on 5/9/2017 MM / DD | / YYYY | Executed on | MM / DD / YYYY |

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| Fill in this inf | ormation to identify your ca | 99) | | | |
|---------------------|---|----------------------------|------------------------------|---|----------------------|
| Debtor 1 | Jasmine | | Mack | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | _ | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case numbe | r | | (State) | | |
| (If known) | | | | | Check if this is a |
| Official | Form 106De | C | | | amended filing |
| Declara | ition About an I | – ndividual Debt | or's Schedules | | 12/1: |
| If two marries | d people are filing togethe | r both are equally recover | sible for cumplying accept | in Comments | |
| | | | | | |
| You must file | this form whenever you fil | e bankruptcy schedules o | r amended schedules. Mai | king a false statement, concealing pro 250,000, or imprisonment for up to 20 | operty, or obtaining |
| U.S.C. §§ 152 | 2, 1341, 1519, and 3571. | m with a bankiupicy case | can result in lines up to a | 20,000, or imprisonment for up to 20 | years, or both, 18 |
| ************** | | | | | |
| Part In Sig | gn Below | | | | |
| Did you | pay or agree to pay some | one who is NOT an attorne | y to help you fill out bank: | ruptcy forms? | |
| ✓ No | | | | | |
| Yes. | Name of person | | Attach Bankruptcy Pe | atition Preparer's Notice, Declaration, and | |
| Formal | W-11 11 - 11 - 11 - 11 - 11 - 11 - | | Signature (Official For | | |
| | | | | | |
| | | | | | |
| | | 1 | | | |
| Under p | enalty of perjury, I declare y are true and correct. | that I have read the summ | nary and schedules filed w | rith this declaration and | |
| | | -11_{A} | | | |
| | mine Mack | 2//m | * | | |
| Signature | e of Debtor 1 | - v | Signature o | of Debtor 2 | |

Date

MM/DD/YYYY

Date 5/9/2017

MM/DD/YYYY

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| Debtor 1 | 1 Jasmine First Name | Middle Name | Mack Last Name | Case number (if known) |
|----------|-----------------------------|-------------------------------|---|---|
| 28. Wi | | u filed for bankruptcy, did y | enter transfer in the contract of the contract of | ment to anyone about your business? Include all financial institutions, |
| | No Yes. Fill in the details | s below. | | |
| | | | Date issued | |
| | Name | | MM/OD/YYYY | |
| | Number Street | | | |
| | City | State Zip Code | | |
| Part 12 | - New | | | |
| a ba | inkruptcy case can res | mine Mack | or imprisonment for up | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature | of Debtor 1 | | Signature of Debtor 2 |
| | Date 5/9 | /2017 | | Date |
| Did | you attach additional (| pages to Your Statement of | Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| Province | No Yes | | | |
| Did | you pay or agree to pa | y someone who is not an at | torney to help you fill ou | t bankruptcy forms? |
| [7] | No | | | |
| Trowns. | Yes. Name of person | | ,** | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Deptoi | r Jasmine | | Mack | Case number (if |
|--------------|---|--|--------------------------|---|
| 1 | First Name | Middle Name | Last Name | known) |
| Part 2: | List Your Unexp | ired Personal Property Lease | s | |
| informa | ation below. Do not | of property lease that you listed in list real estate leases, Unexpired onal property lease if the trustee o | leases are leases that : | Contracts and Unexpired Leases (Official Form 186G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). |
| De | scribe your unexpir | ed personal property leases | | Will the lease be assumed? |
| Le | ssor's name: | ar the transfer for the contract the best below the transfer or the security process where we have a contract the contract the best best and the security of the security process where the security of the se | | No Yes |
| | scription of leased operty: | | | Account |
| Les | ssor's name: | | | No Yes |
| | scription of leased operty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased operty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Part 3: | Sign Below | | | |
| Unde prop | er penalty of perjury erty that is subject | , I declare that I have indicated m to an unexpired lease. | y intention about any p | roperty of my estate that secures a debt and any personal |
| | /s/ Jasmine Mack | Julle | 火 Sign | ature of Debtor 2 |
| D | ate 5/9/2017 MM/DD/XYYY | • | Date | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Mack, Jasmine | Coon No. | Case No. | | | |
|-----------------|---|-----------------------------------|----------|--|--|--|
| | Debtor(s) | Case No. | | | | |
| | | Chapter. | Chapter7 | | | |
| | VE | RIFICATION OF CREDITOR MAT | ΓRIX | | | |
| TI knowledge | The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their dge. | | | | | |
| Date: | 5/9/2017 | /s/ Mack, Jasmin | ne In In | | | |
| | | Mack, Jasmine Signature of Del | otor | | | |

DEPT OF ED/NAVIENT PO BOX 9635 WILKES BARRE, PA, 18773

THE BUREAUS INC 1717 CENTRAL ST EVANSTON, IL, 60201

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

CCB/ULTA 1000 Remington Blvd Bolingbrook, IL, 60440

CCB/FE21CC PO Box 63 Kankakee, IL, 60901

TARGET/TD PO BOX 673 MINNEAPOLIS, MN, 55440

SYNCB/OLDNAV P.O. BOX 29116 SHAWNEE MISSIO, KS, 66201

CB/VICSCRT 220 W SCHROCK RD WESTERVILLE, OH, 43081

MONTGOMERYWD 1112 7th Ave. Monroe, WI, 53566

Autovest, L.L.C. Pa Box 2247 Southfield, MI, 48037

Shindler & Joyce 1990 E Algonquin Rd # 180 Schaumburg, IL, 60173

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| Debtor 1 Jasmine | Mack | Case number (if known) | | |
|--|--|--|---|--|
| First Name Middle Name | Last Name | | | |
| | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| Numerical Security Act. Instead, list it here: | ount received was a benefit | \$0.00 | Thorn all any opposition | |
| For you | \$0.00 | | | |
| For your spouse | \$0.00 | | | |
| Pension or retirement income. Do not include any benefit under the Social Security Act. | amount received that was a | \$0.00 | ************************************** | |
| 10.Income from all other sources not listed above.s amount. Do not include any benefits received under t payments received as a victim of a war crime, a crime international or domestic terrorism. If necessary, list o page and put the total below. | he Social Security Act or against humanity, or | | | |
| | | | | |
| Total amounts from separate pages, if any. | | +\$0.00 | + | 1 |
| 11. Calculate your total current monthly income. A | dd lines 2 through 10 for | \$1,634.07 | | \$1,634,07 |
| each column. Then add the total for Column A to the tot | al for Column B. | - Control of the Cont | *************************************** | <u> </u> |
| | | 1 | | Total current |
| Part 24 Determine Whether the Means Test A | oplies to You | | | monthly income |
| 12. Calculate your current monthly income for the your | CONTROL DE LA CO | | | |
| 12a. Copy your total current monthly income from lin | | Copy line | 11 here → | \$1,634.07 |
| Multiply by 12 (the number of months in a year) | 4 | | | X 12 |
| 12b. The result is your annual income for this part of | the form. | | 12b. | \$19,608.84 |
| | | | | |
| 13 Calculate the median family income that applies | to you. Follow these steps: | | | |
| Fill in the state in which you live. | Ilinois | | | |
| Fill in the number of people in your household. | 1 | | | · |
| Fill in the median family income for your state and size household, | e of | | 13. | \$50,765.00 |
| To find a list of applicable median income amounts, g instructions for this form. This list may also be availab | o online using the link specified in le at the bankruptcy clerk's office. | the separate | | <u></u> j |
| 14. How do the lines compare? | , | | | |
| 14a. Line 12b is less than or equal to line 13. On Go to Part 3. | the top of page 1, check box 1, T | here is no presumption of abu- | se. | |
| 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | f page 1, check box 2, The presun | nption of abuse is determined b | oy Form 122A-2. | |
| Parks: Sign Below | | | | |
| | | a Constantina (Constantina de Constantina de Constantina de Constantina de Constantina de Constantina de Const Constantina de Constantina de Constantina de Constantina de Constantina de Constantina de Constantina de Const | | THE RESERVE OF THE PERSON OF T |
| By signing here, I dectare under penalty of perjury that | at the information on this statemen | t and in any attachments is tru | e and correct. | |
| X /s/ Jasmine Mack | , | | | : |
| /s/ Jasmine Mack Signature of Debtor V | V X Sign | ature of Dobter 2 | . 1100000410014000-1 | ••• |
| Signature of Debies 4 | Sign | ature of Debtor 2 | | : |
| Date 5/9/2017 MM/DD/YYYY | Date | 5/9/2017 MM/DD/YYYY | | |
| If you checked line 14a, do NOT fill out or file Form 1f you checked line 14b, fill out Form 122A-2 and to | t 122A-2, ile it with this form. | | | : |

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B2030 (Form 2030) (12/15)

in

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| re | Jasmine Mack | | Case No. | |
|---|--|--|--|--|
| *************************************** | Debtor | MANAGEM PROPERTY AND | The state of the s | |
| | | | Chapter | Chapter 7 |
| | DISCLOSURE OF COI | PENSATION OF AT | TORNEY F | OR DEBTOR |
| con | suant to 11 U.S.C. § 329(a) and Fed. B npensation paid to me within one year I dered or to be rendered on behalf of th | efore the filing of the petition in ban | knintov or anreed | to he naid to me for services |
| | legal services, I have agreed to accept | | | \$1,353.24 |
| Pric | or to the filing of this statement I have re | ceived | | \$0.00 |
| Bala | ance Due | | | \$1,353.24 |
| 2. The | source of the compensation paid to me | was: | | to provide the state of the sta |
| | Debtor | Other (specify) | | |
| 3. The | source of the compensation paid to me | is: | | |
| | Debtor | Other (specify) | | |
| 4. 2 | I have not agreed to share the above-omembers and associates of my law firm | isclosed compensation with any oth | ner person unless t | hey are |
| - | I have agreed to share the above-discl members or associates of my law firm. the people sharing in the compensatio | A copy of the agreement, together w | son or persons wh vith a list of the nam | o are not nes of |
| 5. In re | eturn for the above-disclosed fee, I have a. Analysis of the debtor's financial site a, bankruptcy; | agreed to render legal service for a attion, and rendering advice to the c | all aspects of the ba debtor in determini | ankruptcy case, including: ng whether to file a petition in |
| | b. Preparation and filing of any petition | , schedules, statements of affairs ar | nd plan which may | be required; |
| | c. Representation of the debtor at the | neeting of creditors and confirmatio | n hearing, and any | adjourned hearings thereof; |
| 6. By a | greement with the debtor(s), the above | disclosed fee does not include the | following services: | |
| | | | | |
| | | CERTIFICATION | | |
| l certif ebtor(s) | y that the foregoing is a complete state in this bankruptcy proceedings. | nent of any agreement or arrangem | ent for payment to | me for representation of the |
| | 5/9/2017 | isi C | had Mizelle | |
| | Date | Signati | ure of Attorney | |
| | <u></u> | Semi | rad Law Firm | TO THE PARTY OF TH |
| | | Nam | e of law firm | |

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CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC \$1,353.24 in attorney fees plus costs in the amount of \$396.76 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding. \$300.00/hr.

Adding additional bills \$50.00

Motion to Reopen and Avoid Lien \$1000.00

Motion to Reopen \$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC . Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

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I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Date: 05/09/2017

Jasmine Mack

Attornev

*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garni